

SAINT IVES, (HUNTS.)
RURAL DISTRICT COUNCIL.

REPORT

For the Year 1902,

BY

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ST. IVES (Hunts.) RURAL DISTRICT COUNCIL.

REPORT.

I beg leave to communicate to the St. Ives Rural District Council my Annual Report for the year 1902 on “the conditions affecting health in the District and . . . the means for improving those conditions,” and in addressing myself to this task I have to point out to the Council that by the “Memorandum as to Annual Reports of Medical Officers of Health,” issued by the Local Government Board, October 1902, I am directed to discuss prescribed subjects in definite order, and give information which may seem superfluous to the Council. The following extract from the Memorandum will make clear the intention of the Local Government Board :—

“As subjects concerning which the Board desire to obtain through Annual Reports of the Medical Officer of Health, not only definite general information, but record also of particular changes of condition that may have occurred incidentally or by action of the local authority, the following deserve to be especially borne in mind :—

“Physical features and general character of the District.

“House accommodation, especially for the working classes ; its adequacy and fitness for habitation. Sufficiency of open space about houses, and cleanliness of surroundings. Supervision over erection of new houses.

“Sewerage and Drainage : its sufficiency in all parts of the District. Condition of sewers and house drains. Method or methods of disposal of sewage. Localities where improvements are needed.

“Excrement disposal : system in vogue ; defects, if any.

“Removal and disposal of house refuse—whether by public scavenger or occupiers : frequency and method.

“Water supply of the District or its several parts : its source (from public service or otherwise), nature (river water, well water, upland water, etc.), sufficiency, wholesomeness, and freedom (by special treatment or otherwise) from risks of pollution.

“Places over which the Council have supervision, *e.g.*, lodging houses, slaughterhouses, bakehouses, dairies, cowsheds, and milkshops factories and workshops, and offensive trades.

“Nuisances : proceedings for their abatement—any remaining unabated.

“Methods of dealing with infectious diseases : notification ; isolation hospital accommodation and its sufficiency ; disinfection.

“With regard to such points it should be remembered that these reports are for the information of the Board and of the County Council as well as of the Council of the District, and that a statement of the local circumstances and a history of local sanitary questions, which may seem superfluous for the latter, may often be needed by the former bodies.”

VITAL STATISTICS.

Vital Statistics
Population, etc.

Since the close of the year the revised official results of the Census, for the County of Huntingdon among others, has been published from which is extracted the following facts which may be of interest to the Council. The population of the district at the Census of 1891 and 1901 respectively is given as 9986 and 9398. There has therefore been an aggregate decrease of 588 in the total population during the intercensal period.

The population of the Warboys sub-district is given as 2847, which number is identical with that at the Census 1891 ; there has been an increase of 97 in the parish of Warboys and an aggregate decrease of 97 in the other parishes in this sub-district.

The population of the Somersham sub-district is given as 3096, an aggregate decrease of 338 during the intercensal period ; this decrease is distributed over all the parishes in this sub-district.

The population of the St. Ives sub-district is given as 3455, an aggregate decrease of 250 during the above mentioned period, distributed over all the parishes in this sub-district with the exception of Wyton where there has been an increase of 7.

It would appear that the number of persons per inhabited house, has increased in the Warboys sub-district from 4·2 at the Census of 1891 to 4·3 at the present Census, and decreased in the Somersham sub-district from 4·1 to 3·8 during the same period. In the St. Ives sub-district the number is the same as at the Census 1891, viz : 4·1.

Owing to chanceful circumstances, which govern the fluctuations of rural populations, I have no guage upon which I can estimate the population to the middle of the year. I therefore use the enumerated population at the Census in making the calculations of vital statistics which are as follows :—

The total number of deaths registered is 134. The deaths ^{Deaths and} in Public Institutions outside the district of persons belonging ^{Death Rate} thereto are respectively—2 in Addenbrooke's Hospital, 1 in Hunts. County Hospital, and 1 in the Three Counties Asylum, which must be added ; while 5 which have occurred in the Union Work-house of persons not belonging to the district, must be subtracted. The corrected number is 133, equal to a death-rate from all diseases of 14·1 per thousand living per annum. The rate for the previous year was 16·0. The death-rate in England and Wales for the same period is given as 16·3 in the summary of the Registrar General contained in the appendix to his report for the last quarter of the year on which he remarks “this is the lowest rate on record.”

Deaths in the group of epidemic diseases in the entire district ^{Epidemic} have been from Diphtheria 1 ; Whooping Cough 1 ; and ^{Mortality}

Diarrhoea 1 ; total 3 ; equal to a death-rate from these diseases of 0·32 per thousand living per annum. The rate for the previous year was 1·70.

Influenza.

Influenza has caused 2 deaths.

Births and Birth Rate

The total number of births registered in the entire district is 222, equal to a birth-rate of 23·6 per thousand living per annum. The birth-rate in England and Wales for the same period is given as 28·6, which is the lowest rate on record with the exception of that for the year 1901.

Infantile Mortality

Infantile mortality as represented by the ratio of deaths of children under one year of age to 1000 registered births, varied in the several sub-districts, viz.: in Warboys 78 ; in Somersham 145 ; in St. Ives 84.

After assigning to each sub-district its share of the deaths in the above four Public Institutions, as per subjoined table, the vital statistics are respectively :—Warboys, general death-rate 11·9 ; epidemic death-rate 1·05 ; birth-rate 27·0 ; Somersham, general death-rate 18·4 ; epidemic death-rate 0·0 ; birth-rate 20·0 ; St. Ives, general death-rate 12·1 ; epidemic death-rate 0·0 ; birth-rate 24·0.

SUB-DISTRICT.	Registered Deaths.	Share of Work-house.	Adden-brooke's Hospital.	Three Counties' Asylum.	Hunts. County Hospital.	Corrected Totals.	Death Rate.
Warboys ...	29	5	...	...	...	34	11·9
Somersham ...	44	10	2	...	1	57	18·4
St. Ives ...	38	3	...	1	...	42	12·1
Entire District	111	18	2	1	1	133	14·1

There is a decrease of mortality over that of the previous year in the Warboys and St. Ives sub-districts, and an increase in the Somersham sub-district; there has been a decrease of deaths of persons at the age periods of 1 to 65, and an increase of deaths of persons at the age periods of 65 and upwards.

The number of deaths from Phthisis is only one-fourth that of Phthisis the previous year; the death-rate from this disease is 0·32 per thousand.

The number of deaths due to Cancer is nearly double that of Cancer the previous year; the death-rate from this disease is 1·38 per thousand.

The following Table shows the deaths and death-rate from Phthisis and Cancer respectively among persons belonging to the district during the seven years 1895-1901.

	PHTHISIS.		CANCER.	
	Deaths.	Death-rate.	Deaths.	Death-rate.
1895.	11	1·12	12	1·22
1896.	5	0·51	6	0·61
1897.	7	0·72	13	1·34
1898.	10	1·04	15	1·56
1899.	3	0·31	12	1·26
1900.	10	1·05	12	1·26
1901.	12	1·27	7	0·74
<hr/> Average for years 1895-1901. <hr/>	<hr/> 8·3 <hr/>	<hr/> 0·86 <hr/>	<hr/> 11·0 <hr/>	<hr/> 1·14 <hr/>

The number of deaths due to diseases of the respiratory organs is identical with that of the previous year.

DISEASE INCIDENCE.

Diseases of a infectious character have been less prevalent Disease Incidence than during the previous year.

No case of Small Pox has been notified during the year. Small Pox

In regard to Scarlet Fever although it has been present during several months of the year, and of greater incidence than during the previous year, at the same time the disease has never assumed an epidemic character in any place. Eighteen cases in ten households have been notified.

In the Warboys sub-district six cases in three households were notified during February, all in the village of Warboys ; the introduction of the disease into the first household assailed was probably from a distance and was communicated from thence to the other two households. The precautionary measures adopted prevented the spread of the disease. One case at Broughton in February could not be satisfactorily accounted for.

In the Somersham sub-district eleven cases in six households were notified, one at Earith in March and July respectively, one at Bluntisham in March, two in May and one in December, and five at Somersham in October. The earlier cases at Bluntisham and Earith respectively appeared to have been connected, but the exact relationship between the two cases could not be satisfactorily traced ; one of the patients was a visitor to Earith. Two cases in one family at Bluntisham occurred in May, and appeared to be in sequence to the case in March. One case at Earith at the beginning of July was only discovered by an accident to a boy which necessitated a visit by a medical man who then found this boy's sister to be suffering from Scarlet Fever. Enquiry into this case elicited the fact that the boy, who had met with the accident, had been on a visit to Cambridge at the beginning of June and a few days after his return developed a rash which was probably scarlatinal, although not verified by a medical man. In view of the absence of several children from school through badly defined illness an investigation was directed to one family in particular where it had been stated that the children had had a rash, but these children were subsequently seen by a medical man who however did not notify them as suffering from Scarlet Fever. One case at Bluntisham in December was visited by the Medical Officer

of Health's Deputy, but no potential facts were elicited. Five cases occurred in October at a Farm on the Chatteris Road at a considerable distance from the village of Somersham, and near to the town of Chatteris ; it was ascertained that the children attended Chatteris School, and that Scarlet Fever was prevailing in that town ; there is little doubt therefore that the disease was contracted there.

No cases of Scarlet Fever have been notified in the St. Ives sub-district.

With regard to Diphtheria eighteen cases in sixteen households have been notified ; the larger number of the cases occurred in the Warboys sub-district. Nine cases in seven households occurred at Bury between January 1st, and March 3rd. This epidemic was evidently a continuance of the outbreak of the disease at this place at the end of the year 1901, which is mentioned in my report for that year. Five cases in five households were notified at Warboys between January 8th and April 6th. Three cases in January were probably imported from Bury, but this surmise could not be satisfactorily established ; one case at the end of March could not be traced to any antecedent case, but the one in April was probably connected with the one in March. Diphtheria

In the Somersham sub-district three cases in three households have been notified. With regard to one case in April at Somersham, which was of the laryngeal form of the disease, there at first appeared to be some doubt as to the true nature of the illness, and moreover there were no circumstances that could connect it with any antecedent case ; the only fact elicited was that the child was known to have drank some sewage contaminated water, which circumstance is scarcely adequate to account for the infection, but a bacterial examination of a rubbing from the throat left no doubt that the case was one of diphtheria. One case at Earith in November was visited by the Deputy Medical Officer of Health but no satisfactory source of infection could be elicited. One case

occurred at Colne in December; the disease was undoubtedly contracted in London where the subject of the illness had been on a visit. It subsequently transpired that a member of the London household, visited by the patient, had been removed to hospital suffering from diphtheria.

One case which was notified on August 23rd at Hemingford Grey could not be accounted for.

Typhoid Fever.

With regard to Typhoid Fever four cases in three households have been notified. The first case occurred at Somersham on May 1st, and was probably due to the bad sanitary condition of the premises and to highly polluted water. One case at Warboys in May occurred at an outlying part of the village and was probably due to the bad sanitary condition of the premises. Two cases occurred in one household at Needingworth in December; enquiry into the first case elicited that there was considerable difficulty in the diagnosis in the early stage of the disease, and it was not until after the lapse of a fortnight that a definite opinion was reached. The sanitary condition of the house was not good, but on examination the water supply, notwithstanding the surroundings of the well, was stated by the Analyst to be chemically pure. There was no history of a previous case from which infection could have been caught; the only circumstance with regard to the case, which may be stated for what it is worth, is that the subject of the illness with his sister had paid a visit to a house where they had supper, and one of the dishes was tinned salmon of which the patient partook but the sister, who escaped, did not. The second case was the above patient's father, who on account of the serious illness of the mother had to nurse the patient; there can be scarcely a doubt that he contracted the disease as a consequence of his service.

Continued Fever.

Three cases of Continued Fever in two households have been notified but it was not quite clear what was the real nature of the illness.

Measles.

Measles prevailed at Hemingford Grey in February and necessitated exclusion from School of particular children for several weeks.

PHYSICAL FEATURES AND GENERAL CHARACTER OF THE DISTRICT.

The description of the physical features and general character ^{Physical} of the district is reproduced from my report for the year 1901. ^{Features, etc.}

The Rural District of St. Ives lies chiefly on Kimeridge and Oxford Clay, capped with patches of Old River Gravels in different parts of the district, which form the only natural source of water supply apart from the rivers.

The river Ouse, which flows in an easterly direction from Huntingdon past the town of St. Ives to Holywell, from whence it flows in a northerly direction to Earith, and would naturally reach the Cam in an easterly direction by the now depleted Old West River were it not that the waters are conveyed by two artificial parallel cuts known as the Old and New Bedford levels, with intervening marsh land known as the Washes, to Lynn.

The villages are low lying except on the north-west side of the district where the ground rises slightly ; some of the villages on the east side near the river appear to be built on the alluvium and are liable to floods.

The villages on the north side of the district are situate on the edge of the Fen proper.

The inhabitants are engaged chiefly in agricultural pursuits.

HOUSE ACCOMMODATION.

The house accommodation in the district, especially for the ^{House} working classes, is generally adequate and is chiefly of the old- ^{Accommodation} fashioned thatched type, but not therefore on that account insalubrious, for the thatched cottage if in good repair and with cleanly surroundings, is generally more comfortable and healthy a dwelling than its brick and slate substitute. Where the houses are hopelessly out of repair they are being replaced by modern

dwellings. The sufficiency of open space about houses, except in a few instances in the larger villages, is adequate, and the cleanliness of the surroundings varies according to the character of the inhabitants.

I append hereto a Table abstracted from the Census, showing the Total Tenements and Tenements of less than five rooms in the district, distinguishing those occupied by various numbers of persons :—

RURAL DISTRICT.	Rooms in Tene- ment.	Tene- ments of less than Five Rooms.	PERSONS PER TENEMENT.											
			1	2	3	4	5	6	7	8	9	10	11	12 or more.
ST. IVES	1	3	1	1	—	—	1	—	—	—	—	—	—	—
Total Tenements—2315	2	83	42	25	6	7	1	—	2	—	—	—	—	—
Tenements of Less	3	190	49	42	31	26	13	10	9	5	4	1	—	—
than Five Rooms—1020	4	744	64	165	146	110	99	60	51	30	14	4	1	—

On the application of the somewhat severe standard of the London County Council, that any ratio above two persons per room constitutes overcrowding, it appears that 33 per cent. of the one-room tenements, 3 per cent. of the two-room tenements, 10 per cent. of the three-room tenements, and 2 per cent. of the four-room tenements, or 4 per cent. of the total tenements of less than five rooms in the district, are overcrowded. It is unfortunate that no comparison can be made between the conditions obtaining at the Census of 1891 and the recent one, because this district was constituted a separate district only after the taking of the former Census.

There is no official supervision over the erection of new houses, but in every instance a water certificate, under the provisions of Sec. 6 of the Public Health (Water) Act, 1878. is required before occupancy.

There has been no change during the year with regard to the number of dilapidated houses, and no new houses have been built.

SEWERAGE AND DRAINAGE.

There is no system of sewerage in the district, but at <sup>Sewerage and
Drainage</sup> Somersham, Fenstanton and Warboys there are surface water drains which are utilized as sewers. In those villages where the surface drains have been sewerized the sewage is disposed of in Fen ditches.

The sewer at Bury was found, on examination, to be blocked; it has been cleaned out and repaired.

The intercepting cesspools in the parishes of Somersham and Warboys respectively have been cleaned out.

The intercepting cesspools at Front and Back Street, Earith, have been regularly cleaned out in order to prevent overflow of solid matter into the river.

Gulley traps have been put in the drains at Warboys.

EXCREMENT DISPOSAL.

In most of the villages there are pail and trough closets and <sup>Excrement
Disposal</sup> pit privies, but these latter are gradually being replaced by the former. A few of the larger houses are provided with water closets connected with cesspools. The fæcal matter is chiefly disposed of on garden ground or allotments.

At Needingworth the pit privies to two cottages have been filled up and pail closets substituted.

At Warboys the pit privies to two cottages have been filled up and pail closets substituted.

REMOVAL AND DISPOSAL OF HOUSE REFUSE.

Removal of
Refuse

The house refuse is disposed of by the occupiers, temporarily in ashpits which in a few instances are too near the dwelling, and subsequently on garden ground. In this regard it might be worth while for the Council to consider whether systematic scavengering might not be instituted in the larger villages in the district.

WATER SUPPLY.

Water Supply

Most of the villages in the district obtain their water supply from shallow wells ; the quality of the water varies according to local circumstances.

At Oldhurst where the supply is obtained from ponds the water is made to pass through a gravel filter before it reaches the service-pipe of the pump.

Part of Fenstanton and Hemingford Grey respectively are supplied by the East Hunts. Water Company.

The question of a new supply of water to Bury which had been under consideration for some time, has been settled by the conveyance of water from a well in a field at Kingsland Farm in Wistow parish, a distance of 1065 yards by an earthenware pipe drain with cement joints and having inspection chambers at various points, to a reservoir, which has been constructed in the village near the Church. The reservoir consists of a double chambered galvanised tank embedded in brickwork ; one chamber is filled with filtering material from which the water passes into the second chamber, whence it is lifted by a pump. It is estimated that the yield will be from 300 to 400 gallons a day.

The parish reservoir at Old Hurst has again been cleared of weeds.

Owing to the failure of wells supplying cottages at Somersham End, Colne, the wells have been deepened

Parish pumps have been repaired at Bury 1, Broughton 1, Colne 1, Earith 2, Fenstanton 2, Old Hurst 1, Pidley 1 Somersham 2, Warboys 2 and Wistow 2.

PLACES OVER WHICH THE COUNCIL HAVE SUPERVISION.

No systematic inspection of Dairies, Cowsheds and Milkshops, ^{Inspections etc.} has been attempted under the Dairies, Cowsheds and Milkshops Order, but the Inspector makes visits to them when specially required to do so.

Slaughterhouses are periodically inspected by the Inspector of Nuisances.

With regard to carrying out the provisions of the Factory and Workshops Act, 1901, the subject has been discussed by the Council and as an initial step they have directed the compilation of a register.

NUISANCES.

Nuisances of various kinds as indicated in the Inspector's ^{Nuisances} Table in the appendix to this report, have been dealt with.

METHODS OF DEALING WITH INFECTIOUS DISEASES.

The methods of dealing with Infectious Diseases are by ^{Isolation} notification, followed by enquiry by the Medical Officer of Health, ^{Hospitals, etc.} Inspector of Nuisances, or by both, according to the importance of the cases.

There is no isolation hospital in the district, but arrangements have been made with the Huntingdon Isolation Hospital Board for the reception of cases of infectious disease from this district. Where the cases are not removed advice is given to householders to carry out isolation of cases in their own homes as far as practicable. The School Authorities are informed of the households in which Infectious Diseases have appeared, with a request to exclude all the members until they are free from infection ; but where epidemic influence show a tendency to spread, the schools are asked to be closed.

In threatened outbreaks of Diphtheria prophylactic doses of Antitoxin are recommended for the protection of other persons exposed to the chances of infection, and bacterial examination of rubbings from their throats and nasal passages is made for the discovery of any unsuspected case of the disease. This prophylactic measure has been used with good effect in the cases mentioned in the paragraph on disease incidence at Warboys and Somersham.

At the instance of the Medical Officer of Health, application was made on March 26th, to the Local Government Board for sanction to incur the cost of prophylactic injections and examination of rubbing of the throats of patients with a view to the prevention of the spread of Diphtheria. On the 27th of November, in the absence of any reply from the Local Government Board and in view of the re-appearance of cases of this disease, the Council on the suggestion of the Medical Officer of Health again communicated with the Board.

One case of Diphtheria from Bury, and one case of Scarlet Fever from Bluntisham, Earith and Somersham respectively have been removed to the Isolation Hospital at Huntingdon.

In view of the universal prevalence of Small Pox, the Council in February, ordered the purchase from the Great Eastern Railway Co., of two of their disused railway carriages for the purpose of isolating any stray case of Smallpox that might occur in the

district. Such provision would of course be quite inadequate for anything further than the isolation of a case for a very limited time till better provision could be made.

Early exclusion from school of particular children was found to be operative in preventing the spread of Diphtheria at Warboys and of Measles at Hemingford Grey.

At the conclusion of a case, the infected rooms and the articles contained therein are disinfected by aerial disinfectants, but there is no machinery in the district for disinfection by heat or steam.

PERMISSIVE ACTS.

The Infectious Disease (Prevention) Act, 1890, and the Permissive Acts Public Health Acts Amendment Act, 1890, have not yet been adopted.

All the above remarks, together with the Tables of Statistics required by the Local Government Board, and the Inspector's Record of Work, I respectfully submit for the consideration of the Rural District Council.

BUSHELL ANNINGSOON.

INSPECTOR'S REPORT

For the St. Ives (Hunts.) Rural District Council,

OF THE SANITARY WORK COMPLETED IN THE YEAR 1902.

Complaints received during the year	...	...	...	91
Houses, Premises, &c., Inspected	...	...	...	276
Re-Inspection of Houses, Premises, &c.	...	...	...	184
Cases of Overcrowding reported and abated	...	...	...	0
Dilapidated houses reported	...	...	...	0
Dwellings Disinfected after illness of an infectious character				19
House Drains repaired, cleansed, trapped, &c.	...	...	...	18
Privies, &c., cleaned and repaired	...	...	...	39
Privies, new provided	...	...	...	0
Pail Closets substituted for Privies	...	...	...	4
Cesspools cleaned out	...	...	...	13
Offensive Ditches cleaned	...	...	...	5
Unwholesome Waters, &c.	...	...	...	2
Accumulation of Dung, Stagnant Water, Animal and other refuse removed	...	...	...	50
Swine Nuisances abated	...	...	...	6
Public Sewer extended	...	...	...	0
Public Sewer repaired	...	...	...	0
Parish Pumps repaired	...	...	...	15
Parish Ponds cleaned out	...	...	...	0

(Signed),

J. ARCHER,

Inspector.

TABLE I.

For the whole of the SAINT IVES (Hunts.) RURAL DISTRICT.

Table showing Vital Statistics for the year 1902 and the antecedent seven years.

YEAR.	Population—Estimated to the middle of the year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.				TOTAL DEATHS IN PUBLIC INSTITUTIONS IN THE DISTRICT.	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District.	NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT.	
				UNDER ONE YEAR OF AGE.		AT ALL AGES.					Number.	Rate.*
		Number.	Rate.*	Number.	Rate per 1000 Births registered.	Number.	Rate.*					
1	2	3	4	5	6	7	8	9	10	11	12	13
1895... ..	9770	253	25·9	34	134	187	19·1	21	5	7	189	19·3
1896... ..	9708	271	27·9	32	118	152	15·6	9	5	...	147	15·1
1897... ..	9646	240	24·8	28	116	146	15·1	12	2	4	148	15·3
1898... ..	9584	245	25·5	25	101	151	15·7	12	4	1	148	15·4
1899... ..	9522	255	26·7	23	90	158	16·6	23	3	6	161	16·9
1900... ..	9460	233	24·6	28	120	176	18·6	28	8	2	170	17·9
1901... ..	9398	244	25·9	28	114	148	15·7	25	6	9	151	16·0
Averages for years 1895—1901	9584	249	26·0	28	112	160	16·6	19	5	4	159	16·5
1902... ..	9398	222	23·6	22	99	134	14·2	23	5	4	133	14·1

* Rates calculated per 1000 of estimated population.

NOTE.—The deaths included in Column 7 of this table are the whole of those registered during the year as having actually occurred within the district or division. The deaths included in Column 12 are the number in Column 7, corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

By the term “Non-residents” is meant persons brought into the district on account of sickness or infirmity and dying in Public Institutions there; and by the term “Residents” is meant persons who have been taken out of the district on account of sickness or infirmity and have died in Public Institutions elsewhere.

The Public Institutions taken into account for the purpose of this and the following tables are the Union Workhouse, Addenbrooke’s Hospital, Hunts. County Hospital, and Three Counties Asylum.

Area of District in acres (exclusive of area covered by water).....44,982.

Total population at all ages.....9398

Number of inhabited houses2296

Average number of persons per house4·0

At Census
of 1901.

TABLE II.

St. Ives (Hunts.) Rural District.

Table showing Estimated Population, Births, Corrected Deaths at all ages, and Infant Mortality for the year 1902 and the antecedent seven years.

NAMES OF LOCALITIES.	I Whole District.				2 Warboys.				3 Somersham.				4 St. Ives.			
	Population. Estimated to the middle of the year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population. Estimated to the middle of the year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population. Estimated to the middle of the year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population. Estimated to the middle of the year.	Births registered.	Deaths at all ages.	Deaths under 1 year.
YEAR.	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.	a.	b.	c.	d.
1895.....	9770	253	189	34	2847	89	61	18	3299	79	54	9	3624	85	74	7
1896.....	9708	271	147	32	2847	90	45	10	3265	66	55	8	3596	115	47	14
1897.....	9646	240	148	28	2847	83	49	10	3231	75	52	9	3568	82	47	9
1898.....	9584	245	148	25	2847	98	46	12	3197	58	45	4	3540	89	57	9
1899.....	9522	255	161	23	2847	90	44	4	3163	70	49	8	3512	95	68	11
1900.....	9460	233	170	28	2847	91	40	6	3130	60	61	11	3483	82	69	11
1901.....	9398	244	151	28	2847	77	40	11	3096	83	44	9	3455	84	67	8
Averages of year 1895—1901	9584	249	159	28	2847	88	46	10	3197	70	51	8	3539	90	61	10
1902.....	9398	222	133	22	2847	77	34	6	3096	62	57	9	3455	83	42	7

NOTES —(a) The separate localities adopted for this table are areas of which the population is obtainable from the census returns. Block I is used for the whole district: and blocks 2, 3, and 4 for the several localities.
 (b) Deaths of residents occurring in Public Institutions beyond the district are included in the sub-columns *c* of this table, and those of non-residents registered in Public Institutions in the district are excluded.
 (c) Deaths of residents occurring in Public Institutions are allotted to the respective localities, according to addresses of the deceased.

TABLE III.

SAINT IVES (HUNTS.) RURAL DISTRICT.

Cases of Infectious Disease notified during the Year 1902.

NOTIFIABLE DISEASE.	Cases Notified in Whole District.							Total Cases Notified in each Locality.			No. of Cases removed to Hospital from each Locality.		
	At all Ages.	At Ages—Years.						1	2	3	1	2	3
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.						
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria	18	...	3	4	6	4	1	14	3	1	1	...	...
Membranous Croup	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	16	...	...	1	1	11	3	9	6	1	...	...	...
Scarlet Fever	18	...	5	13	...	...	...	7	11	...	...	3	...
Typhus Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric Fever	4	...	...	1	...	3	...	1	1	2	...	...	...
Relapsing Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Continued Fever	3	...	...	2	1	...	...	3	...	...	...	...	...
Puerperal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Plague	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	59	...	8	21	8	18	4	34	21	4	1	3	...

NOTES.—The localities adopted for this table are the same as those in tables II. and IV.

There is no Isolation Hospital in the district, but by arrangement between the Rural District Council and the Huntingdon Isolation Hospital Board, infectious cases belonging to this district are admitted into that Institution.

TABLE IV.

SAINT IVES (HUNTS.) RURAL DISTRICT.

Causes of Death at several age periods during the year 1902.

CAUSES OF DEATH.	Deaths in whole District at subjoined Ages.							DEATH IN OR BELONGING TO LOCALITIES (AT ALL AGES)			Total Deaths in Public Institutions in the district
	At all ages.	Under 1 year.	1 and under 5	5 and under 15	15 and under 25	25 and under 65	65 and up ward				
								Warboys.	Somersham	St. Ives.	
1	2	3	4	5	6	7	8	9	10	11	12
Smallpox ... ..	...	...	...	...	...	...	...	...	...	...	...
Measles ... ..	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever ... ..	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	1	1	...	...	...	...	...	1	...	...	...
Diphtheria and Membranous Croup	1	...	...	...	...	...	1	1	...	...	...
Croup ... ..	...	...	...	...	...	...	...	...	...	...	...
Fevers { Typhus ... ..	...	...	...	...	...	...	...	...	...	...	...
	Enteric ... ..	...	...	...	...	...	...	...	...	...	...
	Other continued ... ..	...	...	...	...	...	...	...	...	...	...
Epidemic Influenza	2	1	1	...	...	...	...	2	...	...	...
Cholera ... ..	...	...	...	...	...	...	...	...	...	...	...
Plague ... ..	...	...	...	...	...	...	...	...	...	...	...
Diarrhoea (<i>See notes on next page</i>)	1	...	...	...	...	...	1	1	...	...	...
Enteritis (<i>See notes on next page</i>)	...	...	...	...	...	...	...	...	...	...	...
Puerperal Fever ... ..	...	...	...	...	...	...	...	...	...	...	...
Erysipelas ... ..	...	...	...	...	...	...	...	...	...	...	...
Other septic diseases	1	...	...	1	...	...	...	...	1	...	...
Phthisis	3	...	...	...	...	3	...	1	2	...	...
Other tubercular diseases	2	1	...	...	...	1	...	...	1	1	...
Cancer, malignant disease	13	...	...	...	...	3	10	1	6	6	2
Bronchitis	9	...	...	...	...	1	8	5	2	2	3
Pneumonia	9	2	1	1	...	1	4	2	7	...	...
Pleurisy ... ..	...	...	...	...	...	...	...	...	...	...	...
Other diseases of Respiratory Organs ... ..	...	...	...	...	...	...	...	...	...	...	...
Alcoholism, Cirrhosis of Liver... ..	...	...	...	...	...	...	...	...	...	...	...
Venereal diseases ... ..	...	...	...	...	...	...	...	...	...	...	...
Premature birth	3	3	...	...	...	...	...	...	3	...	...
Diseases and accidents of Parturition	4	2	...	...	...	2	...	3	1	...	...
Heart Diseases	12	1	...	...	...	2	9	1	10	1	4
Accidents	1	...	...	...	...	...	1	1	...	...	...
Suicides	1	...	...	...	...	1	...	...	1	...	...
Not certified... ..	3	2	...	...	...	...	1	...	1	2	1
All other causes	67	9	2	1	1	9	45	15	22	30	13
All causes	133	22	4	3	1	23	80	34	57	42	23

See Notes on next page.

NOTES.

- (a) In this Table all deaths of "Residents" occurring in public institutions, whether within or without the district, are included with the other deaths in the columns for the several age groups (columns 2-8). They are also, in columns 9-11, included among the deaths in their respective "Localities" according to the previous addresses of the deceased as given by the Registrars, and deaths of "Non-residents" occurring in public institutions in the district are excluded.
- (b) See notes on Tables I. as to the meaning of "Residents" and "Non-Residents," and as to the "Public Institutions" taken into account for the purposes of these Tables.
- (c) All deaths occurring in public institutions situated within the district, whether of "Residents" or "Non-residents," are, in addition to being dealt with as in note (a), entered in the last column of this Table.
- (d) Under the heading of "Diarrhœa" are included deaths certified as from diarrhœa, alone or in combination with some other cause of ill-defined nature ; and also deaths certified as from—
- Epidemic enteritis ;
 - Zymotic enteritis ;
 - Epidemic diarrhœa. Summer diarrhœa.
 - Dysentery and dysenteric diarrhœa.
 - Choleraic diarrhœa, cholera, cholera nostras (in the absence of Asiatic cholera)

Under the heading of "Enteritis" are included those certified as from Gastro-enteritis, Muco-enteritis, and Gastric Catarrh, unless from information obtained by enquiry from the certifying practitioner or otherwise, the Medical Officer of Health has reason for including such deaths, especially those of infants, under the specific term "Diarrhœa."

Deaths from diarrhœa secondary to some other well-defined disease are included under the latter.

